



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 4126

Bib Data Sheet

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------|
| SERIAL NUMBER 10/669,336 | FILING DATE 09/22/2003 RULE | CLASS 340 | GROUP ART UNIT 2636 | ATTORNEY DOCKET NO. |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------|

APPLICANTS

John Ghazarian, Henderson, NV;

Daniel Joseph Cote, Henderson, NV;

** CONTINUING DATA *****

This appln claims benefit of 60/413,045 09/23/2002

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 12/15/2003

| | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|------------------------|----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY NV | SHEETS DRAWING 3 | TOTAL CLAIMS 3 | INDEPENDENT CLAIMS 2 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>JAS</i> | | | |

ADDRESS

John Ghazarian
 530 Startup Street
 Henderson, NV
 89052

TITLE

Safety door system

| | | |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE RECEIVED 450 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|